



Amendment Under 37 C.F.R. § 1.116
Group Art Unit 2621, Expedited Procedure

00862.022055.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: J. L. Couso
TAKAYUKI SUZUKI)
: Group Art Unit: 2621
Appln. No.: 09/714,277)
: Filed: November 17, 2000)
: For: IMAGE PROCESSING)
: APPARATUS AND METHOD)
: August 19, 2004

RECEIVED

AUG 25 2004

Technology Center 2600

Mail Stop AF
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL ACTION

Sir:

In response to the Office Action dated May 21, 2004, please amend the above-identified application as follows. Amendments to the claims are reflected in the listing beginning at page 2, and the Remarks begin at page 8.



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Amendment Under 37 C.F.R. § 1.116
Group Art Unit 2621, Expedited Procedure
Docket No. 00862.022055.

In re Application of:

TAKAYUKI SUZUKI

Application No.: 09/714,277

Filed: November 17, 2000

For: IMAGE PROCESSING APPARATUS
AND METHOD

Examiner: J. L. Couso

Group Art Unit: 2621

Date: August 19, 2004

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The Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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Technology Center 2600

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 18	MINUS	** 20	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	* 3	MINUS	*** 3	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

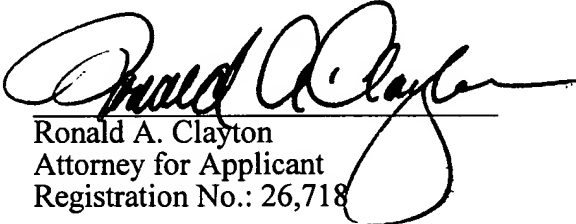
* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Ronald A. Clayton
Attorney for Applicant
Registration No.: 26,718

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